Please type a plus sign (+) inside this box —

PTO/SB/05 (11-00) Approved for use through 10/31/2002, OMB 0651-0032 U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

## UTILITY **PATENT APPLICATION TRANSMITTAL**

OBLX-01024US0 Attorney Docket No. Joan C. Teng First Inventor Template Based Workflow Definition

(Only for new nonprovision	nal applications under 37 CFR 1.53(b))	Express Mail Label No. EL 897 525 544 US
	TION ELEMENTS  erning utility patent application content	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
1. Fee Transmittal For (Submit an original and a submit an argument claims submit a submit and a submit a submit and a submit	orm (e.g., PTO/SB/17) duplicate for fee processing) mall entity status.  [Total Pages 126 ] of the invention to Related Applications arding Fed sponsored R & D quence listing, a table, rogram listing appendix the Invention of the Invention n of the Drawings (if filed) ption	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. paper c. Statements verifying identity of above copies  ACCOMPANYING APPLICATION PARTS  9. Assignment Papers (cover sheet & document(s)) 10. 37 CFR 3.73(b) Statement Power of Attorney
b. Copy from a (for continual in the second	I Total Sheets  [ Total Pages	11. English Translation Document (if applicable)  12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449  13. Preliminary Amendment  14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized)  15. Certified Copy of Priority Document(s) (if foreign priority is claimed)  16. Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.  17. Other:
18. If a CONTINUING APPLICATION, check appropriate hox, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:  Continuation Cont		
Customer Number or Bar Code Label  (Instart Customer No. or Attach bar code labe) here)  Or Correspondence address below		
Name	Burt Magen, Reg. No. 37,1	75
Address City	Vierra Magen Marcus Harr 685 Market Street, Suite 5 San Francisco	40 State California Zip Code 94105-4206
Country	U.S.A.	Telephone (415) 369-9660 Fax (415) 369-9665
Name (Print/Type)	Burt Magen	Registration No. (Attorney/Agent) 37,175

Signature

Burden Hour Statement This form is estimated to take an hours to complete firms will vary depending upon the needs of the individual base. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231. Washington, DC 20231